



## CALIFORNIA EMERGENCY MANAGEMENT AGENCY

Fire and Rescue Branch  
3650 Schriever Avenue  
Mather, CA 95655  
Phone (916) 845-8711  
Night-Weekends: (916) 845-8911  
Fax: (916) 845-8396  
E-Mail: OES\_Fire@oes.ca.gov



January 26, 2009

Dear Chief,

California Emergency Management Agency (Cal EMA) is reiterating, reminding, and re-engaging all organizations to submit via fax, or mail the Form-101 **"Apparatus Use Report"** on assigned apparatus/vehicles (engines/water tenders/communications/US&R/swift water) which parties have an agreement. Apparatus and vehicles can be defined as agency owned (Cal EMA) not leased. The Operations Bulletin 34 provides directions on the process and use of the form.

The documentation is required by the State of California and will be due within ten days of the end of the month. Please fax or mail the required monthly apparatus/vehicle mileage F-101 **"Apparatus Use Report"** information to Cal EMA, Fire & Rescue Branch, at the address or fax listed above. As an assignee, I recommend your organization retain a copy for your records as well.

Thank you in advance for your attention to this matter and we appreciate your cooperation in assisting Cal EMA, Fire & Rescue Branch in achieving the mandated mileage reporting requirement.

Sincerely,

A handwritten signature in dark ink, appearing to read "Kim Zagaris", written over a horizontal line.

KIM ZAGARIS  
State Fire and Rescue Chief

KZ/ces

Enclosures

cc: File

State of California  
Office of Emergency Services  
Fire and Rescue Branch

**OPERATIONS BULLETIN #34**

**Subject:**     *Instructions for Compiling Apparatus Use Report  
                  (Form F-101)*

**PURPOSE:**

Form F-101 is used to record information applicable to the daily use and operation of OES Fire, Rescue and Communications apparatus; i.e., emergency and non-emergency use and maintenance checks, etc. It provides a running history of each unit which may be referred to at any time for a variety of purposes.

**DESCRIPTION:**

This form replaces the following forms:

- Daily Log (Form F-106)
- Daily Apparatus Report (Form F-101, Rev 7/88)
- Monthly Training Report (Form F-105)

This form is to be maintained in the apparatus log book provided for each unit. At the end of each month a copy shall be kept in the log book and the original form mailed to:

Fire and Rescue Division  
Office of Emergency Services  
3650 Schriever Avenue  
Mather, CA. 95655

Duplicate copies shall remain in the apparatus log book, but may be removed and destroyed after one year.

**INSTRUCTIONS:**

1. Apparatus Number: Enter OES vehicle number (i.e., OES-200)
2. License Number: Enter license number of OES vehicle (i.e., E-012345)
3. Department: Name of fire agency assignee
4. County: County of fire agency assignee
5. Month: Month of reporting period
6. Year: Year of reporting period

7. Mileage: Vehicle odometer reading on date of recording
8. Pump Use/Beginning Hours: Indicate the hour meter readings of the main and booster pumps at the beginning of each month.  
  
Indicate the daily pump use opposite each date.
9. Vehicle/Apparatus Use: Emergency Usage Within Assigned...
  - a. Local Jurisdiction: Indicate, to the nearest 1/4 hour, the usage of the vehicle in response to emergencies. Include in this space, anytime the vehicle is being used as a substitute for an assignees first line apparatus, that has been taken out of service due to mechanical problems.
  - b. Operational Area/County: Indicate, to the nearest 1/4 hour, the mutual aid usage of the vehicle in response to emergencies outside the assignees jurisdiction, but within the operational area/county.
  - c. OES Region: Indicate, to the nearest 1/4 hour, the mutual aid usage of the vehicle in response to emergencies outside the assignees operational area, but within the assigned region.
  - d. Outside Assignees Region: Indicate, to the nearest 1/4 hour, the mutual aid usage of the vehicle outside of the assignees region.
10. Vehicle/Apparatus Use: Non-Emergency Use...
  - a. During Training Activities: Indicate, to the nearest 1/4 hour, those times the vehicle is used in some type of training activity.
  - b. Other Activities: Indicate, to the nearest 1/4 hour, any other times the vehicle is used (i.e., parades, demonstrations, displays, etc. or any other non-emergency use.
11. Vehicle Mechanical Checks:
  - a. Weekly checks: Make a check mark on the date that the weekly mechanical check is performed. Refer to the back of the form for those additional items that need to be checked above and beyond the daily/after use checks.
  - b. Monthly checks: Make a check mark opposite the date that the monthly mechanical check is performed. Refer to the back of the form for those additional items that need to be checked above and beyond the daily/after use and weekly checks.
12. Checked By: Initials - this space is provided for the person making the checks.

**ADDITIONAL INFORMATION:**

There are two additional annual items that engine assignees are requested to perform on their assigned vehicles.

- An annual pump service test and an annual hose test. A copy of the pump service test results is to be mailed to OES Fire and Rescue Division Headquarters, Sacramento.
- A statement in the "Remarks" section, on the back of the Apparatus Use Report, indicating the date(s) of the annual hose test is requested. The hose test is to be performed according to the NFPA standards.

Those assignees, with communications units and support units, are expected to coordinate an annual FCC communications check with OES Telecommunications Division of their radio systems.

Note: The date of this annual radio check shall be recorded in the "Remarks" section on the back of the Apparatus Use Report.

The "Remarks" section shall be used to record any equipment shortages, damages, mechanical problems, major repairs or adjustments, servicing, new equipment, add-ons, or any other item of importance relating to the care and use of this vehicle or the equipment carried on it. Indicate the dates of all entries.

At the end of each month, the completed form is to be mailed to the Fire and Rescue Division at the address listed on the first page of this Bulletin.

\*\*\*\* SEE SAMPLE COPY OF FORM F-101 ATTACHED \*\*\*\*

Office of Emergency Services – Fire and Rescue Branch

APPARATUS USE REPORT

Apparatus Number \_\_\_\_\_ Department \_\_\_\_\_  
 License Number \_\_\_\_\_ County \_\_\_\_\_

Note: Where necessary, indicate time to the nearest ¼ hour.

DATE		PUMP USE			VEHICLE/APPARATUS USE						Vehicle Mechanical Checks		Checked By
Month:		Beginning Hours:			Emergency Usage Within Assigned...				Non-Emergency Use		Weekly	Monthly	Initials
Year:		Mileage	Pump Hours		Local Jurisdiction	Area County	OES Region	Outside Region	Training	Other			
		Miles	Main	Booster									
1													
2													
3													
4													
5													
6													
7													
8													
9													
10													
11													
12													
13													
14													
15													
16													
17													
18													
19													
20													
21													
22													
23													
24													
25													
26													
27													
28													
29													
30													
31													
Totals													

\*\*\* RETAIN THIS FORM IN ENGINE APPARATUS LOG BOOK FOR ONE YEAR AFTER LAST ENTRY \*\*\*

OES Form F-101 (Rev. 9/2000)



Following is the minimum acceptable standard for OES-owned apparatus:

**AFTER EACH USE:  
(Or Daily, if in Front Line Service)**

- Check engine oil level
- Check coolant level
- Check fuel level
- Check for oil and coolant leaks
- Check all drive belts and coolant hoses
- Check tires for cuts
- Check all lights, siren, and horn
- Check inventory
- Check primer oil reservoir

**WEEKLY – ALL OF THE ABOVE, PLUS:**

- Check radio operation
- Check/Service batteries
- Check tire pressure
- Drain all air reservoirs

**MONTHLY – ALL OF THE ABOVE, PLUS:**

- Road test – note mechanical problems and report through established department channels.
- Lubricate all discharge gates and drain valves, plus exercise all valves
- Check maintenance book (State Form 271) for service that may be due; i.e., oil and filter, chassis lubrication, tune-up, etc. (See Maintenance Bulletin #32 for every 6-month/6,000 mile maintenance or annual/12,000 mile servicing requirements.)
- Engage/operate pump(s), check primer operation and all gauges, and floor test the relief valve at 100 PSI and 200 PSI.
- Adjust pump packing or repack as necessary.
- Perform dry vacuum test and report any problems through established department channels.
- Adjust brakes as needed. (See Maintenance Bulletin #27 for minor and major brake inspections.)
- Replace fuel in special equipment; i.e. Floto-pumps, K-12 saws, jaws of life, etc.
- Check Allison transmission only when fluid is hot. Do not overfill! (See Maintenance Bulletin #24.)
- Check clutch free travel if equipped with standard transmission. If adjustment is needed, report it!

**ANNUALLY:**

- Annual in-service pump test results. Send copy of test results to: OES Fire and Rescue Branch, Sacramento, CA 95832-1499.
- Annual hose test results as per N.F.P.A. standards. Send copy of test results to: OES Fire and Rescue Branch, Sacramento, CA 95832-1499.

**REMARKS:**

Note any equipment shortages, mechanical problems, or service due below:

---



---



---



---

**APPARATUS USE REPORT**

Apparatus Number \_\_\_\_\_

Department \_\_\_\_\_

License Number \_\_\_\_\_

County \_\_\_\_\_

Note: Where necessary, Indicate time to the nearest ¼ hour.

DATE		PUMP USE		VEHICLE/APPARATUS USE						Vehicle Mechanical Checks		Checked By
Month:	Mileage	Beginning Hours:		Emergency Usage Within Assigned...				Non-Emergency Use		Weekly	Monthly	Initials
Year:		Pump Hours		Local Jurisdiction	Area County	OES Region	Outside Region	Training	Other			
	Miles	Main	Booster									
1												
2												
3												
4												
5												
6												
7												
8												
9												
10												
11												
12												
13												
14												
15												
16												
17												
18												
19												
20												
21												
22												
23												
24												
25												
26												
27												
28												
29												
30												
31												
<b>Totals</b>												

\*\*\* RETAIN THIS FORM IN ENGINE APPARATUS LOG BOOK FOR ONE YEAR AFTER LAST ENTRY \*\*\*



Following is the minimum acceptable standard for OES-owned apparatus:

**AFTER EACH USE:  
(Or Daily, if in Front Line Service)**

- Check engine oil level
- Check coolant level
- Check fuel level
- Check for oil and coolant leaks
- Check all drive belts and coolant hoses
- Check tires for cuts
- Check all lights, siren, and horn
- Check inventory
- Check primer oil reservoir

**WEEKLY – ALL OF THE ABOVE, PLUS:**

- Check radio operation
- Check/Service batteries
- Check tire pressure
- Drain all air reservoirs

**MONTHLY – ALL OF THE ABOVE, PLUS:**

- Road test – note mechanical problems and report through established department channels.
- Lubricate all discharge gates and drain valves, plus exercise all valves
- Check maintenance book (State Form 271) for service that may be due; i.e., oil and filter, chassis lubrication, tune-up, etc. (See Maintenance Bulletin #32 for every 6-month/6,000 mile maintenance or annual/12,000 mile servicing requirements.)
- Engage/operate pump(s), check primer operation and all gauges, and floor test the relief valve at 100 PSI and 200 PSI.
- Adjust pump packing or repack as necessary.
- Perform dry vacuum test and report any problems through established department channels.
- Adjust brakes as needed. (See Maintenance Bulletin #27 for minor and major brake inspections.)
- Replace fuel in special equipment; i.e. Floto-pumps, K-12 saws, jaws of life, etc.
- Check Allison transmission only when fluid is hot. Do not overfill! (See Maintenance Bulletin #24.)
- Check clutch free travel if equipped with standard transmission. If adjustment is needed, report it!

**ANNUALLY:**

- Annual in-service pump test results. Send copy of test results to: OES Fire and Rescue Branch, 3650 Schriever Ave. Mather, CA 95655.
- Annual hose test results as per N.F.P.A. standards. Send copy of test results to: OES Fire and Rescue Branch, 3650 Schriever Ave. Mather, CA 95655.

**REMARKS:**

Note any equipment shortages, mechanical problems, or service due below:

---

---

---

---